ART. V.—*Extracts from the Records of the Boston Society for Medical Improvement.* By WM. W. MORLAND, M. D., Secretary.

May 12. *Hydrocephalus.*—Dr. COALE reported the case of A. H., born January 14th, 1849. Parents healthy; first child. Dr. C. was called to see her when she was two weeks old; found her labouring under cerebral symptoms, which soon resolved themselves into undeniable signs of water on the brain. She was treated with small doses of calomel, and afterwards with hydriodate of potassa, with apparent benefit at first. The head, however, steadily increased in size. The general health was good except when disturbed by teething—at which time she had occasional spasms, never amounting, however, to a general convulsion.

		Measurement of head.		Inches.		Inches.
Sept. 12th, 1849.	Over crown from meatus to meatus			12½	Round	18½
Nov. 1st,	"	"	"	13½	"	19½
" 28th,	"	"	"	14	"	20
May 10th, 1851.	"	"	"	17¾	"	23½

The family having moved out of town in Aug. 1850, Dr. C. did not see the child after that except at rare periods. The last time was May 10th, 1851. Her height is now thirty-one inches; she lies on her back; is blind, but hears, though imperfectly. The pressure above has forced down the vault of the orbit so that the eyeball seems lower, and more covered by the lower than the upper lid; much of the white above the cornea being exposed, whilst the cornea is half covered by the lower lid. The mouth contains the usual number of teeth. Motion of limbs perfect, but feeble, except of right arm, which is paralyzed almost entirely. Fond of throwing the left hand about, and with it occasionally feels the right arm, and resists any attempts to meddle with it. Extremities cold, making it necessary to keep a good fire in the room day and night through the winter. Never cries or frets. Takes, three times a day, ten ounces of milk, sucked from a bottle. Bowels open with regularity once a day.

The child died two months and a half after this, without any remarkable change.

May 26. *Otorrhœa of Twenty Years' Duration, terminating fatally from Hemorrhage.* Case furnished by Dr. F. H. GRAY. Dr. PARKMAN showed the specimen.—F. C., twenty-one years of age, of scrofulous habit, though having a good share of health, had been troubled with a purulent discharge of fetid character from the right ear, from infancy.

On the evening of April 10th, 1851, patient rode several miles on horseback, and on the following morning complained of general uneasiness, though sufficiently able to attend to his ordinary business. On the morning of the 15th,

severe pain commenced in right ear, which continued for three successive days, at the end of which period, copious and offensive purulent discharges found their way into the meatus auditorius and likewise into the mouth. Patient was greatly relieved by the discharges, and was able to walk and ride out, though he still suffered from headache, until the morning of the 21st, when some coagulated blood was ejected from the mouth. Copious hemorrhage took place from the ear and into the mouth at intervals, varying in quantity from ℥iv to Oj, during the next twenty hours, when he quietly laid himself back, and expired. During the whole illness, there was an almost daily occurrence of vomiting, with the pulse unusually slow, possibly to be referred to the influence of narcotics.

At the autopsy, there was found a slight bloody effusion in the lower surface of the cerebellum, proceeding from a small gangrenous opening in the posterior surface of the right lateral sinus, just before it terminates in the jugular vein; the sinus was also ulcerated on the side next the petrous portion of the temporal bone, and blood was extensively effused into the cavity of the ear and into the cellular tissue behind the pharynx. The petrous portion of the temporal bone, sawn through and exhibited, showed the cavity of the ear deeply affected with caries, and undoubtedly the inflammation had spread from this point, involving the sinus. The specimen is in the Society's Cabinet.

June 9. *Ovarian Tumour.* Dr. CHAS. E. WARE reported the case.—He first saw the patient (a single woman) June 29th, 1850. She was then fifty-nine years of age, and had perceived the enlargement of the abdomen for about a year. It had occasioned no inconvenience beyond a little embarrassment in walking. The swelling was occasioned by a tumour, hard and elastic, divided into three lobes. The central lobe appeared to originate from the fundus of the uterus, having the bladder directly between it and the pubis, and extending above the umbilicus. To the left of these tumours, between the crest of the ilium and the false ribs, there was another tumour, loose and flaccid like a half empty sac. Dr. Ware was called to see her on account of vomiting, and some disturbance of the bowels occasioned by the interference of the tumour. She was speedily relieved. She had similar attacks in July, September, and in November, at which latter time there was great fullness of the abdomen, and distinct ascites. She had, during this time, been taking the oxymuriate of mercury, and afterwards hydriodate of potash, without any distinct advantage.

In January, 1851, she had another attack of vomiting. At this time, the abdomen had very much diminished in size, and there was no appearance of fluid in the peritoneum. In the right groin, there was a group of enlarged inguinal glands; some of them as large as a hazelnut. No tenderness about them, nor signs of inflammation. At the time of her death, these had entirely disappeared. The tumours remained about the same, except that

they were more distinct on account of the general emaciation. Up to this time, in the interval of her attacks of vomiting, or of diarrhœa, which would continue from a week to a fortnight, she was able to keep about. After this attack, she rarely left the house, and was often confined to her bed. She slowly wasted in strength and flesh, was able to bear little food, and had more frequent attacks of vomiting.

March 31*st*. She was seized with griping pain in the bowels, and some looseness. She took to her bed, and did not again leave it. Three weeks afterwards a more severe attack occurred, under which she sank, June 4th.

Autopsy.—Very great emaciation. No fluid in the peritoneum. The inguinal glands entirely subsided. The tumour arose from the left ovary. It had only one very slight adhesion, and that to the omentum. Although forming one mass, it was lobulated into four or five parts. One of these was a cyst large enough to contain a teacup of fluid. The fluid was about the colour of strong coffee. Another small cyst, about the size of an English walnut, contained a soft paste of a dark bistre colour, which, under the microscope, presented only brown granules and granular corpuscles. The other lobes, which constituted the mass, and would weigh four or five pounds, were solid, and had much the appearance of carcinoma. There were several small cavities in them containing a limpid fluid. The whole mass had a somewhat œdematous appearance. Under the microscope it presented cells, caudate, irregular, and nucleated, but no granular corpuscles. There was a distinct stroma similar to that of carcinoma. At the lower part of the small intestines, the membrane was intensely red, rough, and at points ulcerated.

There was no disease in any of the other organs.

June 23*d*.—Dr. SHATTUCK, Jr., reported the following cases:—

Chronic Dysentery, Diarrhœa; less after taking Oil of Turpentine—Peritonitis not revealed by Symptoms—Extensive Ulceration of the Mucous Membrane of the Large Intestine.—B. P., fifty-five years of age, born in Genoa, had been in America two years—during the last of which, had lived in Boston. He entered the Massachusetts General Hospital April 19, 1851, reporting himself as having suffered for two months from chronic diarrhœa and abdominal pain. He knew of no cause for his disease; of dark complexion, emaciated; six or eight yellowish stools in twenty-four hours; tenesmus; abdomen flat, rigid, not tender on pressure; appetite small; no fever. He was put upon a diet of boiled milk and lime-water, thickened with flour, or pounded cracker; took chalk mixture and paregoric, tannic acid and powdered opium; up to the 30th April, there had been no improvement. He now took half an ounce of the mucilage of gum Arabic with half a drachm of the spirits of turpentine, and fifteen drops of the tincture of opium, three times a-day. He had an ounce of cherry brandy in the morning; chicken and maccaroni for his dinner. May 17th, he was more comfortable; less abdominal pain; more appe-

tite; two or three dejections every day. He took, for one day, three doses of the tincture of nux vomica, gtts. viii; had numerous dejections, with pain; the former medicine was resumed, and on the 21st he had hut two dejections. He gradually lost strength, so as not to be able to walk about the ward; the 27th, he was in bed; no abdominal pain; no tenderness of abdomen on pressure. The 28th, the pulse was 106, small, feeble; prostration; no stool in last twenty hours; died that night.

At the autopsy, a half pint of pus was discovered in the abdominal cavity, the intestines being glued together by lymph, and their peritoneal coat and that of the cavity finely injected; mucous membrane of small intestines and stomach quite healthy. In large intestines, ulcerations commenced about two inches from the ileo-cæcal valve, small, round, numerous, several extending to peritoneal coat; six inches from the valve, three parallel strips of ulceration, three inches in length by three or four lines in breadth, extending to the submucous cellular tissue. Numerous small ulcerations in sigmoid flexure.

Chronic Dysentery—Sudden Death—Small Effusion of Blood between Dura Mater and Arachnoid—Peculiar Injection and Ulceration of Large Intestine.—Joachim, a Portuguese seaman, twenty-eight years of age, was taken with diarrhœa in a voyage from Batavia to Boston, and had been ill about ten weeks, Dec. 17th, when he arrived in this country. He ate indiscriminately; took no care of himself; continued to suffer from abdominal pain, diarrhœa, loss of flesh and strength, and entered the hospital April 18th. He was put on a diet of lime-water and milk, and pounded cracker; took astringents and opiates for several days. He continued to have seven or eight loose yellowish discharges in the twenty-four hours; occasionally, blood and mucus. He was then put on meat and rice, brandy and water, taking occasionally powdered opium or laudanum. Small epistaxis on the 21st; on the 29th, had a faint turn from which he recovered; ate his dinner with usual relish; died suddenly about five o'clock in the evening.

At the autopsy, a patch of effused blood three inches in diameter, rather more than a drachm in quantity, was found anteriorly on the right side between the dura mater and the arachnoid. The brain generally soft. The mucous membrane of stomach and small intestines pale, of sufficient consistence. The liver was healthy; its weight three pounds and a half. Injection in spots under serous and mucous membranes of large intestines, some of a bluish colour, some of a bright red colour, not corresponding to each other. Ulcerations small, circular; in some of these, patches of mucous membrane, extending to the cellular tissue. Mucous membrane of large intestines generally soft. Intestinal tube containing less of its secretions and fecal matter than usual, there having been free operations about the time of death.

Chronic Dysentery prevented by Oil of Turpentine—Strangury—Recovery.—Mary Beasly, a spare woman, muscular system sufficiently developed, healthy;

had had no long illness; had one attack of diarrhœa, which lasted about three weeks, in 1849. She came over to this country in August, 1850; suffered from sea-sickness during the voyage, which otherwise was pleasant; no fever or diarrhœa amongst fellow-passengers. She arrived in New York, and went immediately to live with her son; working moderately. She was taken with abdominal pain, and had six or eight loose stools in the twenty-four hours, with, occasionally, slime and blood, about a month after her arrival. She took pills, which controlled her discharges for a day or two at a time; occasionally she would have none. She entered the hospital June 10th, having had six or eight discharges a day for the last two weeks; pain; little or no appetite; tongue not remarkable; pulse 84; skin not remarkable; abdomen not full, tender on pressure. She took a pill with two grains of tannic acid and half a grain of opium twice a-day; five or six stools, with some blood and mucus. On the 11th, she took half an ounce of castor oil in a cup of flaxseed tea, which was followed that day by two doses, at regular intervals, of half an ounce each of the mucilage of gum Arabic, half a drachm of the spirits of turpentine, and six drops of the elixir of opium. She had three dejections on that day, none on the 12th; and, on the 14th, in the morning, she was attacked suddenly by severe abdominal pain. The house physician gave her a grain of opium and thirty drops of laudanum in a starch enema. Micturition bloody and painful. She took opiates and mucilages; was better on the 17th, well on the 22d, and left on the 30th, perfectly well in every respect, gaining flesh and strength.

These were the only cases of chronic dysentery in the medical wards of the Massachusetts General Hospital during the months of March, April, May, and June. There was one case of acute dysentery during the same period. Of one hundred and five cases of acute dysentery, which were received at the hospital during a period of twenty-four years, but three cases occurred in the spring months. Of nineteen cases of chronic dysentery, during the same period of years, there were also three in the spring. The peculiarities of these cases are, perhaps, sufficiently obvious without any farther comment.

June 23. *Poisoning from Eating of Strawberries—Eczema.* Case reported by Dr. ALLEY.—A gentleman ate freely of strawberries at noon. In the course of half an hour he was seized with nausea, which did not terminate in vomiting, but disappeared in about an hour. Towards evening he perceived a slight irritation upon his chin, accompanied with redness and itching. The next morning the whole of the right side of the face was swollen, and during the day the eruption extended across the forehead and over the left side of the face, and the swelling increased so as nearly to close the eyes. The same day, the eruption appeared on the anterior portion of the chest, on the scrotum, and extended down the inner side of the thighs. It was characterized by crops of minute vesicles, thickly crowded together; and upon the chin, and over the upper lip, appeared an exudation of yellow serum. The

constitutional symptoms were slight, the patient complaining somewhat of pain across the forehead; restlessness at night. Pulse accelerated; complained of no pain in abdomen. Patient reports that, six years ago, a similar attack followed the eating of strawberries, but did not appear to be so directly caused by them. Has eaten them occasionally since, but not without some feelings of discomfort. The bowels were freely opened by saline cathartics, and a light diet ordered. In the course of five days, the swelling subsided, redness disappeared, and the skin was rapidly assuming a healthy appearance.

June 23.—*Severe Urticaria from Hyoscyamus.* Case reported by Dr. CABOT.—Mr. B. was suffering severe pain in abdomen, and as it was deemed important that the medicine which he had taken (castor oil) should be allowed to operate, he was directed to take a teaspoonful of tinct. hyoscyami every hour until he had taken three doses—unless he was relieved sooner from his pain. Soon after the first dose, he felt his lips swell somewhat, and became drowsy. After the second dose, passed a large quantity of flatus. About ten minutes after the third dose, his nose swelled very much, which swelling extended all over his face and body, growing less severe below his waist; this was accompanied with a prickly sensation and itching. The skin of the face was very red, shining, and hard; the eyes were shut; there was no interval seen until below middle of body, where hunches and irregular patches appeared scattered over the surface, and some smaller ones appeared like enlarged papillæ of the skin. He could hardly utter a word, owing to a "stiffness of the tongue and lips," as he expressed it; what he did say was with a thick, blundering manner, like that of a drunken man: his mind appeared perfectly clear. The eruption began to subside in about an hour and a half from the time the last dose was taken, and had almost or quite disappeared the next morning.

June 27.—*Gangrene of Appendix Vermiformis.* Dr. J. M. WARREN related the case.—The patient was a gentleman forty years of age. He had always been subject to what are called bilious complaints. About four years since, he was confined for some weeks to the house with a severe attack of colic, attended with constipation; and at this time Dr. W. observed a small hard tumour, tender on pressure, in the right lumbar region. Two years ago last October, he had a second attack, in which the pain was excruciating, and required the constant inhalation of ether and use of the opiates to relieve him. At this time there was a diffuse swelling in the right iliac and lumbar regions, quite hard and very tender. Under the use of leeches, and by inducing a slight mercurial action on the system, he slowly recovered. At this time, Dr. W., fearing some organic complaint, not only from the swelling, but from his great susceptibility to cold and disturbed digestion, advised him to relinquish business, at least so far as to allow him to have his mind perfectly free from any care, and to give him an opportunity of paying particular attention to his

health. This he did, and has been quite free from any trouble until the final attack. This came on after exposure to cold and some irregularity in diet. The pain, for a day or two, amounted merely to a feeling of uneasiness, but gradually became excessive. A tumour could be distinguished, at this period, in the right iliac fossa, the size and length of the forefinger; was quite hard, and could be almost seized, through the integuments, and lifted up. The pain and tenderness were so great as to require the overpowering use of opiates, administered by enema. On the third day there was a slight evacuation from the bowels by means of an enema; but the patient shortly after fell into a state of collapse, and died on the third day after the violent seizure. For the last twenty-four hours there was the most distressing hiccough. On examination after death, extensive peritoneal inflammation was found to exist. There was very great induration of the omentum, with firm adhesions, arising apparently from the previous attack, two years before. Some purulent matter escaped from the cavity of the pelvis. The appendix vermiformis was found gangrenous and perforated at both ends, and in its central portion was contained a mass of indurated feces the size of a prune stone. On section of this substance, no nucleus could be discovered.

Amputation at the Shoulder-joint. Dr. J. M. Warren.—The patient was thirty-two years of age, and was brought to the Massachusetts General Hospital on the 16th May, his arm having been drawn in between the cog-wheels of powerful machinery used for pressing hemp, two hours before—the limb passed in up to the shoulder. The bones of the hand were found to be crushed, the radius and ulna not broken; the lower two-thirds of the humerus communicated, and an opening over the brachial artery, two inches below the axilla, allowed the finger to be passed in up to the joint. The limb was removed by an anterior and posterior flap. Some difficulty was experienced in disarticulating the head of the humerus, from the fact that the bone being broken below, no purchase could be had by which the head could be lifted from its socket. A powerful pair of forceps had been provided for this purpose, but the displacement was effected without having recourse to them. The patient has done well. Dr. W. stated that the case was interesting, as being the first case of amputation at the shoulder-joint that had ever occurred at the Massachusetts General Hospital. The patient, whose case was reported to the Society in January, when the limb had been removed at the shoulder-joint for malignant disease, was now perfectly recovered, and had resumed his occupations.

July 14.—*Traumatic Injuries of the Iris.*—Dr. Williams reported two cases where considerable violence done to the iris had been followed by a very trifling amount of inflammation.

The first was a case where an operation for artificial pupil had been performed upon the right eye of a farmer aged sixty-one. Inflammation of the eye occurred twenty-seven years since, producing extensive adhesions of the

iris to the cornea, and a dense lencoma which covered the lower half of the cornea and the small portion of the pupil which remained unadherent. The other eye was lost last March. In performing the operation, a portion of iris was drawn out through a wound of the cornea, and a sufficient portion excised to form a pupil of rather more than the average size, towards the outer canthus. This was accomplished with some difficulty, the manœuvres being impeded by the extensive adhesions. Yet no inflammation followed. The patient might have gone out the next day, except that prudence forbade his doing so, and he actually did go out on the fifth day after the operation, seeing well enough to guide himself. His sight continued to improve, and he returned home to the country on the twelfth day.

The second case was that of a young man of twenty who was wounded by an explosion of a bottle of "mineral water." The fragment of glass divided the cornea horizontally in its whole extent, at the level of the lower edge of the pupil, and the wound extended so far into the sclerotica as to make its whole length half an inch. The iris protruded through the whole of this long wound, the pupil being deformed, and the entire substance of the iris put upon the stretch. This long hernia of the iris was greatly distended by aqueous humour accumulated behind it, and, it being impossible to effect its reduction, it was punctured with a cataract needle. The aqueous humour escaped in a jet, to the distance of three feet, and the tumour instantly collapsed. It became, however, re-distended on subsequent days, and the puncture was repeated four or five times. This proving ineffectual, a portion of iris was excised at the centre of the ridge, and from this time it remained collapsed until union of the edges of the wound was accomplished, the iris forming a portion of the cicatrix. No increase of the ocular vascularity followed these operations; but, on the contrary, the patient was relieved from the sensations of pain and tension he had before experienced. He promptly recovered, and a fortnight after the accident, there was no appearance of commencing traumatic cataract, but vision continued good. The glass must have struck obliquely, and glanced off, without penetrating the globe.

July 14.—*Syphilitic Ulcer on Glans Penis, and Syphilitic Tubercular Eruption on Skin, fifteen years after exposure.*—Dr. DURKEE exhibited a patient, a married man, who consulted him about the first of May last, on account of an ulcer on the glans penis. At that time the ulcer encircled the orifice of the urethra, and was about the size of half a dime. Three weeks before calling upon Dr. D., the patient discovered a small pimple close to the lower edge or border of the orifice, and made known his trouble to one of his neighbours, who attempted to cure it by applying a decoction of various roots and herbs, and an ointment of resin and hog's lard, &c. The pimple soon became an ulcer, and the inguinal glands on both sides became swollen. Patient states that fifteen years ago he contracted gonorrhœa, which yielded to treatment in a few weeks; that he never had been exposed except at the time above men-

tioned; and that he never had chancres externally. Although the ulcer was of a suspicious character, yet it was difficult to judge how much its appearance might have been modified by the applications which had been resorted to. Patient was put upon the use of iodide of potass in syrup of sarsaparilla, fifteen grains daily, for two weeks, and then increased the quantity to twenty-two grains daily for three weeks longer. It was then discontinued in consequence of a minute papular eruption with slight erythema, which it had brought out upon the face, chest, &c. This eruption faded away in a few days, and was followed by genuine syphilitic tubercles sparsely disseminated upon the face, head, back of the neck, and other parts, where they have remained with characteristic persistence, and without manifesting any disposition to ulcerate, up to the present time. Upon laying aside the iodide of potass, patient was put upon the internal use of dilute nitric acid, and lastly upon mercurials. Topical remedies, black wash, aromatic wine, nitric acid two drops to the ounce of water, cold water dressing, saturated tincture of iodine, saturated solution nitrate of silver, &c.

Patient was a sort of country trader, and was engaged in various speculations which he did not choose to entrust to any one else; it was impossible to prevail upon him to keep quiet for any length of time, and the desired effects of the remedies were thus in a great measure defeated. On two or three occasions, he took board in the city for six or eight days, during which time some amendment would take place. He would take courage from this, and insist that he was well enough to go home. Complained somewhat of Boston charges, and said that he would take the responsibility of the case upon himself; and that, if it did not go "on to his mind," he would take the blame. In this way the case progressed from bad to worse. The ulcer spread over a large portion of the glans penis, which became a good deal swollen, and the use of the bougie was required. The cervical glands became enlarged, fauces inflamed, deglutition painful, nocturnal pains in lower extremities, and the patient had but little sleep. He at length got thoroughly frightened, relinquished business, came to the city under the apprehension that his disease was of a malignant character, and that he would lose a portion of the penis if he did not get help soon. He now expressed a willingness to remain in the city, without regard to expense, as long as might be necessary. During the last few days, a favourable change has again taken place. His case excited particular interest from the fact that so long a time had elapsed since the virus was imbibed into the system.